

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL

094 189,410

FILING DATE

APPLICANT(S)

CLAIMS

IND.	DEP.	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
		IND.	DEP.	IND.	DEP.	IND.	DEP.
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50							
TOTAL IND.		8					
TOTAL DEP.		1	2				
TOTAL CLAIMS		7	7				

IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					